04/15/24 COVID

Significant Increases in Cancer Mortality After COVID mRNA Vaccination, Japanese Researchers Find

A Japanese peer-reviewed study found statistically significant increases in cancer mortality, especially after the third COVID-19 mRNA vaccine dose. John Campbell, Ph.D., analyzed the study on his podcast. During a separate episode, Campbell discussed the study with Angus Dalgleish, a professor of oncology at St. George's, University of London.

By John-Michael Dumais

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A Japanese peer-reviewed study found statistically significant increases in cancer mortality, especially after the third COVID-19 mRNA vaccine dose, according to John Campbell, Ph.D., a prominent healthcare commentator.

In an April 13 podcast, Campbell discussed the study published April 8 in the journal Cureus. The study analyzed official Japanese government statistics to compare age-adjusted cancer mortality rates during the COVID-19 pandemic (2020-2022) with pre-pandemic rates.

Campbell also discussed the findings with oncologist Angus Dalgleish in a podcast that aired today.

Campbell first showed the increases in mortality from all causes in Japan from 2021 through the present. The study indicated a 2.1% mortality increase in 2021 and a 9.6% increase In 2022.

Regarding cancers, the researchers found no significant excess mortality in 2020, but a 1.1% increase in 2021 after the rollout of the first and second vaccine doses, and a 2.1% increase in 2022, after two-thirds of the population had received a third dose of the mRNA COVID-19 vaccines.

Mortality for some cancers increased by as much as 9.7%, according to the study.

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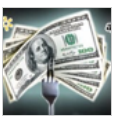
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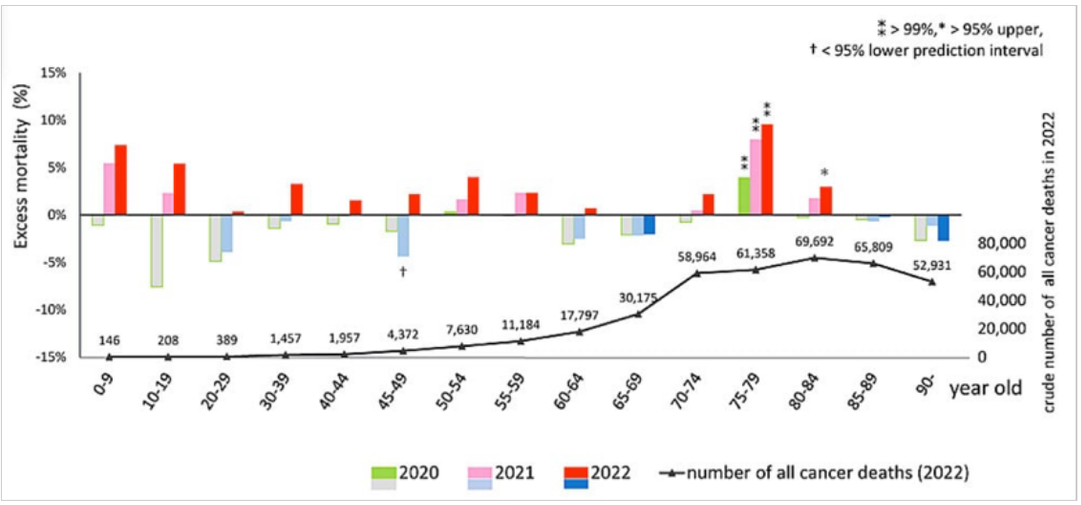
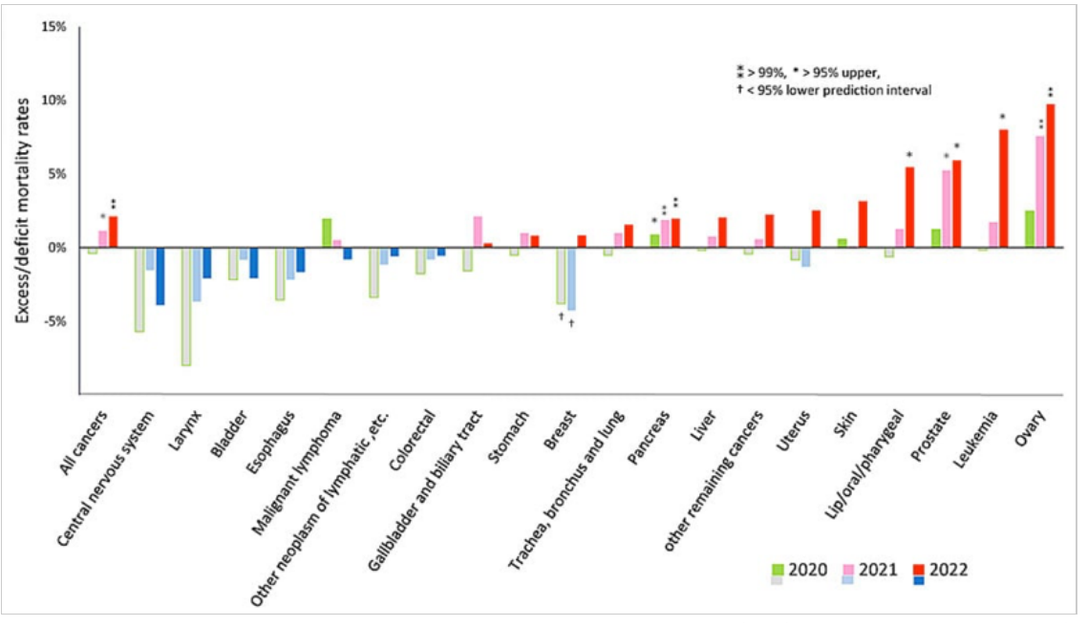


Credit: Gibo M., Kojima S., Fujisawa A., et al.

The data showed significant increases in mortality from the following cancers:

- Ovarian cancer: increases of 2.5% in 2020, 7.6% in 2021 and 9.7% in 2022.
- Leukemia: a decrease of 0.2% in 2020 and increases of 1.7% in 2021 and 8.0% in 2022.
- Prostate cancer: increases of 1.2% in 2020, 5.3% in 2021 and 5.9% in 2022.
- Oral and pharyngeal cancers: a decrease of 0.6% in 2020 and increases of 1.3% in 2021 and 5.5% in 2022
- Skin cancer: increases of 0.6% in 2020, 0.1% in 2021 and 3.2% in 2022.
- Uterine cancer: decreases of 1.1% in 2020 and 1.3% in 2021, and a 2.5% increase in 2022



Credit: Gibo M., Kojima S., Fujisawa A., et al.

"So again we see this strong temporal correlation between quite significantly increased … rates of ovarian cancer with the vaccine rollouts here," Campbell said, calling each additional correlation "another 'weird coincidence.'"

"All cancer deaths are statistically significant, Campbell said. "Excess [deaths] emerged in 2021 and increased further in 2022. In addition, significant excess mortality was observed after August 2021, whereas mass vaccination of the general population began around April 2021."

Campbell noted that while the study did not measure new cases and some types of cancer take years to develop, the findings suggest the vaccines may be accelerating cancer deaths in patients with preexisting tumors.

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'Nothing to see here, shut up'

Dalgleish, a renowned oncologist and professor at St. George's, University of London, has warned about the potential risks of RNA-based vaccines since early in the pandemic.

In 2022, he sent an urgent letter to The BMJ warning about leukemia, non-Hodgkin lymphoma and other cancers he said are associated with the mRNA shots.

In a separate interview with Campbell published today, Dalgleish said he observed a concerning pattern of rapidly progressing cancers in his patients who had received booster doses.

Dalgleish told Campbell about melanoma patients who were stable for years suddenly going into rapid relapse — typically within 3-12 months after COVID-19 vaccination.

"I shouted, I screamed: 'The canary in the mine!'" Dalgleish said, but was told it was "pure anecdotal, nothing to see here, shut up and by the way, you'll upset cancer patients."

Having conducted research on vaccines, Dalgleish said, "It's an adage now" that subsequent booster doses would become increasingly less effective until they "disturbed the immune system so much that the disease you were trying to prevent was actually fueled by it."

Despite the attempts to suppress his observations, Dalgleish said he was contacted by doctors "from all over the place" telling him, "We are seeing the same thing."

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How the vaccines might promote cancer

The Japanese study authors and Dalgleish discussed several potential mechanisms by which the mRNA vaccines could promote cancer development and progression.

"These spike proteins and nanoparticles induce microclots," Dalgleish said, noting that cancer patients are already predisposed to blood clotting disorders.

"From my training, I remember specifically that prostate and pancreatic cancers are really associated with increased clotting," he said.

"One of the major causes of mortality in patients with cancer is cancer-associated thrombosis [blood clots]," the study authors noted.

In addition to the blood clotting risks, the study highlighted the potential for the vaccines to suppress cancer immunosurveillance by interfering with the innate immune response.

"Of course, cancer probably arises regularly, but the immune system [normally] takes care of it," Campbell said.

"T-cell response is suppressed or exhausted … after the third shot, the first booster," Dalgleish said. "Even my own practice is bullying us to go and get a spring booster to just set you right for the summer. … It's unbelievable."

"Some studies have shown that type I interferon responses, which play an essential role in cancer immunosurveillance, are suppressed after SARS-CoV-2 mRNA-LNP [lipid nanoparticle] vaccination," the study authors stated.

Campbell and Dalgleish also discussed the possibility of the vaccines directly causing DNA damage and mutations that could lead to cancer, particularly through the inhibition of tumor suppressor genes like P53, BRCA (breast cancer genes) and MSH3.

The study authors suggested the downregulation of ACE2 receptors by the spike protein could result in excessive oxidative stress, which can damage DNA and cause cancer.

They cited studies showing that the mRNA can be reverse-transcribed into the human genome, potentially leading to chronic inflammation, DNA damage and increased risk of cancer.

Finally, the study authors proposed the mRNA vaccines, through the binding ability of the spike proteins, specifically bind to estrogen receptor alpha (ERα) and upregulate transcription activity, leading to breast, ovaria and prostate cancers.

Dalgleish also raised the issue of intravascular coagulation — "very long long clots in the major vessels" that he has heard about "from the mouth of undertakers."

Campbell said he spoke with U.K.-based undertakers, who said they were seeing it in about 20% of bodies they were embalming. "We know that these clots now almost certainly are made of amyloid protein … that can potentially be made from the genetic instruction of the [vaccine] by what's called frame shifting," he said.

"My worry is that we might not have seen anything yet, Dalgleish said. "We're just seeing a few icebergs as we sail across the Atlantic and the big ice sheets have yet to come."

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It is very clear that they have lied to us'

Campbell and Dalgleish emphasized the troubling absence of similar cancer mortality data being publicly shared by health agencies and governments in other countries.

"Why aren't these data presented in papers in the United States and the United Kingdom is an open question," Campbell said, noting that, unlike other studies, the Japanese researchers were not blaming the "COVID-19 infection itself or reduced cancer care due to lockdown."

Dalgleish criticized the lack of engagement and transparency from experts and authorities, accusing them of suppressing information about the potential risks of the vaccines.

"It is very clear that they have lied to us," Dalgleish said, but added, "People are just suddenly waking up. Those who fell for it are actually admitting now that 'I fell, I couldn't believe it.'"

Campbell agreed, adding, "But people often do lack the specific knowledge and I put myself in that category. It took a long time before I realized we were wandering well and truly down a garden path."

Campbell and Dalgleish called for more extensive investigation and disclosure of cancer data in light of the Japanese study's findings, emphasizing the urgent need for scientific inquiry and public awareness about the potential link between mRNA vaccines and increased cancer deaths.

Watch Campbell's 'Japan data' April 13 podcast:

Watch Campbell and Dalgleish's 'Cancer after covid vaccination' April 15 podcast:

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John-Michael Dumais

John-Michael Dumais is a news editor for The Defender. He has been a writer and community organizer on a variety of issues, including the death penalty, war, health freedom and all things related to the COVID-19 pandemic.

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62nitro

8 days ago

It looks like everything is working as planned. As a pureblood, I hate to say I told you so, but the "Globalist Elites" had to find some way to reduce the earth's population. This is a crime against humanity of unequaled proportion. Severe punishment of the perpetrators needs to follow. They knew, and they should pay.

10 0 Reply Share ›

Lisa ↗ 62nitro

8 days ago

The fact that Gates calls it 'the final solution' should have alarmed people. Sadly, few people today know much about the holocaust or they may have seen it coming. Will they be tried for their crimes?-who knows. Karma will catch up with them if justice doesn't.

5 0 Reply Share ›

62nitro → Lisa
8 days ago
I wouldn't want to be in their shoes when they stand before God, but I would love to be a fly on the wall to see them get what they deserve.
1 0 Reply Share ›

Bev Jo → Lisa
8 days ago
There is no karma and no god, unfortunately for justice.
0 0 Reply Share ›

Bev Jo → 62nitro
8 days ago
What is a "pureblood"?
0 0 Reply Share ›

John Stone Mod → Bev Jo
8 days ago
It is a colloquial term for someone who had not had a Covid shot.
2 0 Reply Share ›

62nitro → Bev Jo
7 days ago
Unvaxed.
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Halina Grodzinski
8 days ago
I don't understand why people are so gullible, and don't question things which media, doctors and other figures of power try to sell them. It's time to wake up people and see which way the world is going, and start to protest against all the nonsense they try to sell.
4 0 Reply Share ›

Lorraine murji
8 days ago
Dr Campbell is a snake. During covid he saw the data and promoted it. He did not alarm people of it's dangers and some family members trusted him, and took the vaccine. Now he has turned the table and Is acting like he was unaware of the dangers. Shame we have physicians who really don't care about the public they are only concerned about keeping their jobs
1 1 Reply Share ›

ZoeyMO → Lorraine murji
2 days ago
Dr. Campbell is the kind of human we all should be, someone who is not only willing to examine preexisting assumptions and change his mind when presented with new data, but also willing to talk about it with the world.
0 0 Reply Share ›

Peter van der Stam
5 days ago
I am wondering why Big pHARMa is not defending themselves by telling the public that that is a result from the Atomic bombs on Hirhoshima and Nagasaki.
They know how to lie.
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